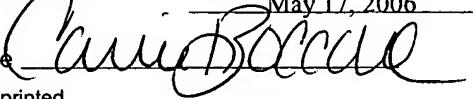




AP
JFW

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 4860P2643						
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p>May 17, 2006</p> <p>Signature </p> <p>Typed or printed name <u>Carrie Boccaccini</u></p>								
<p>In re Application of Xiaochun Nie, et al.</p> <table border="1"> <tr> <td>Application Number 10/022,151</td> <td>Filed 12/14/2001</td> </tr> <tr> <td colspan="2">For SYSTEM AND METHOD FOR INTEGRATING</td> </tr> <tr> <td>Art Unit 2173</td> <td>Examiner Zhou, Ting</td> </tr> </table>			Application Number 10/022,151	Filed 12/14/2001	For SYSTEM AND METHOD FOR INTEGRATING		Art Unit 2173	Examiner Zhou, Ting
Application Number 10/022,151	Filed 12/14/2001							
For SYSTEM AND METHOD FOR INTEGRATING								
Art Unit 2173	Examiner Zhou, Ting							
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p>								
<p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) <u>\$500.00</u></p>								
<p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____</p>								
<p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p>								
<p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
<p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p>								
<p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u>. I have enclosed a duplicate copy of this sheet.</p>								
<p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>								
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.</p>								
<p>I am the</p>								
<p><input type="checkbox"/> applicant/inventor.</p>								
<p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p>								
<p><input checked="" type="checkbox"/> attorney or agent of record.</p>								
<p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p>								
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>								
<p><input type="checkbox"/> *Total of _____ forms are submitted.</p>								

Based on PTO/SB/31 (04-05) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 11/30/2005.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

05/19/2006 CNGUYEN 00000071 10022151

01 FC:1401

500.00 OP



EE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\$)** **500.00**

Complete if Known	
Application Number	10/022,151
Filing Date	December 14, 2001
First Named Inventor	Xiaochun Nie
Examiner Name	Zhou, Ting
Art Unit	2173
Attorney Docket No.	4860P2643

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	60	60** =	0 X 50.00 =	\$0.00
Independent Claims	5	5** =	0 X 200.00 =	\$0.00
Multiple Dependent				

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Fee Paid

Other fee (specify)

SUBTOTAL (2)

(\$)

500.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	James C. Scheller	Registration No. (Attorney/Agent)	31,195	Telephone	(408) 720-8300
Signature				Date	5/17/2006